

What can *in vitro* digestion models add to human risk assessment of contaminated soil ?

rivm

National Institute
for Public Health and
the Environment













History *in vitro* digestion models in soil

- ◆ Closer look at *human* risk assessment methodology
- ◆ Contaminant levels above the intervention values
- ◆ Especially the case for lead in the Netherlands
- ◆ For PAH's in countries like Denmark and Sweden
- ◆ Due to incorrect or too stringent assumptions in risk assessment ?

Risk assessment methodologies

CSOIL applied for intervention values and *human* risk assessment
comparable to other european models

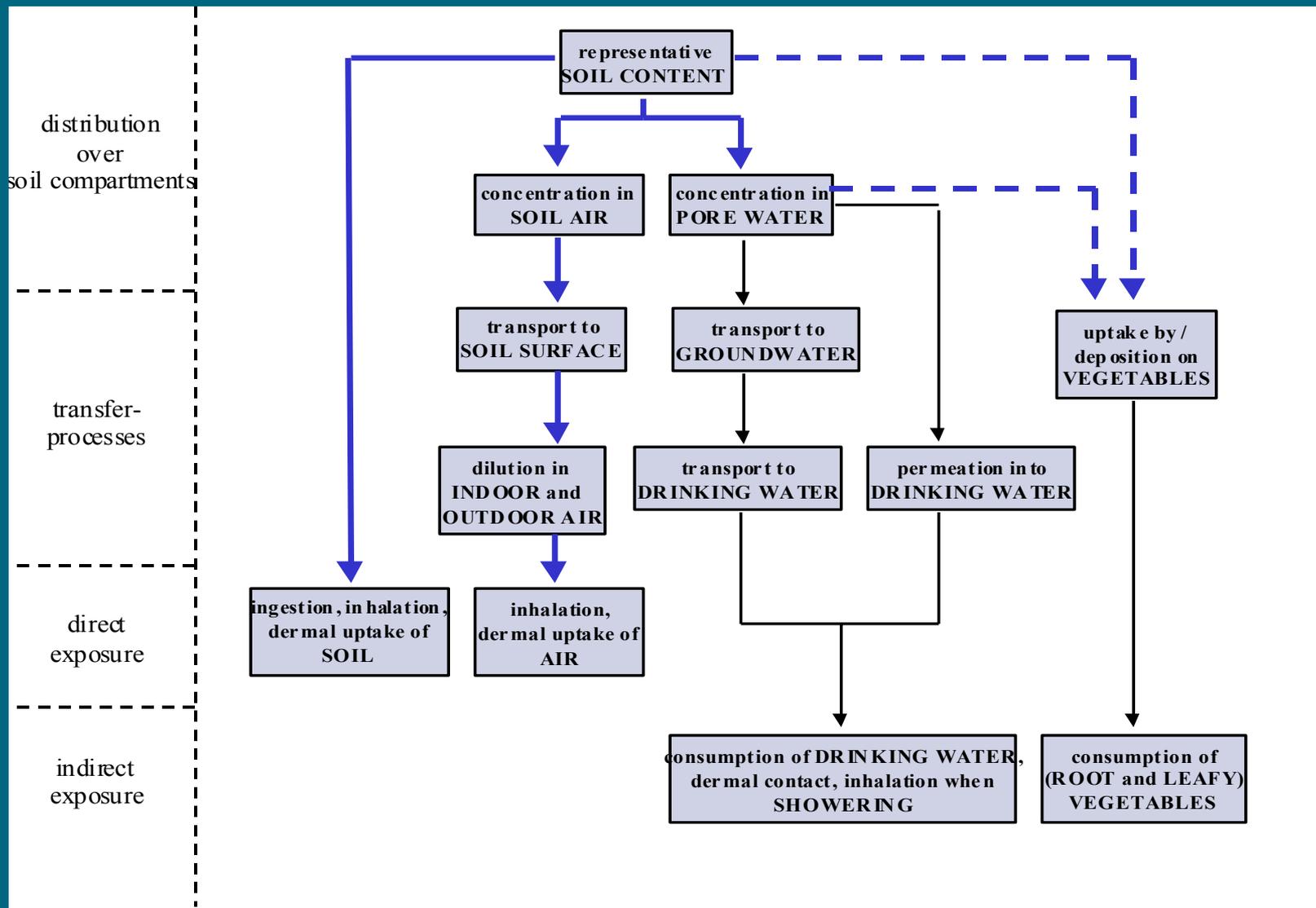
SUS site specific remediation urgency system (ecotox, human tox, risk of migration)
applied for site specific risk assessment

Both used for Dutch Soil Protection Act

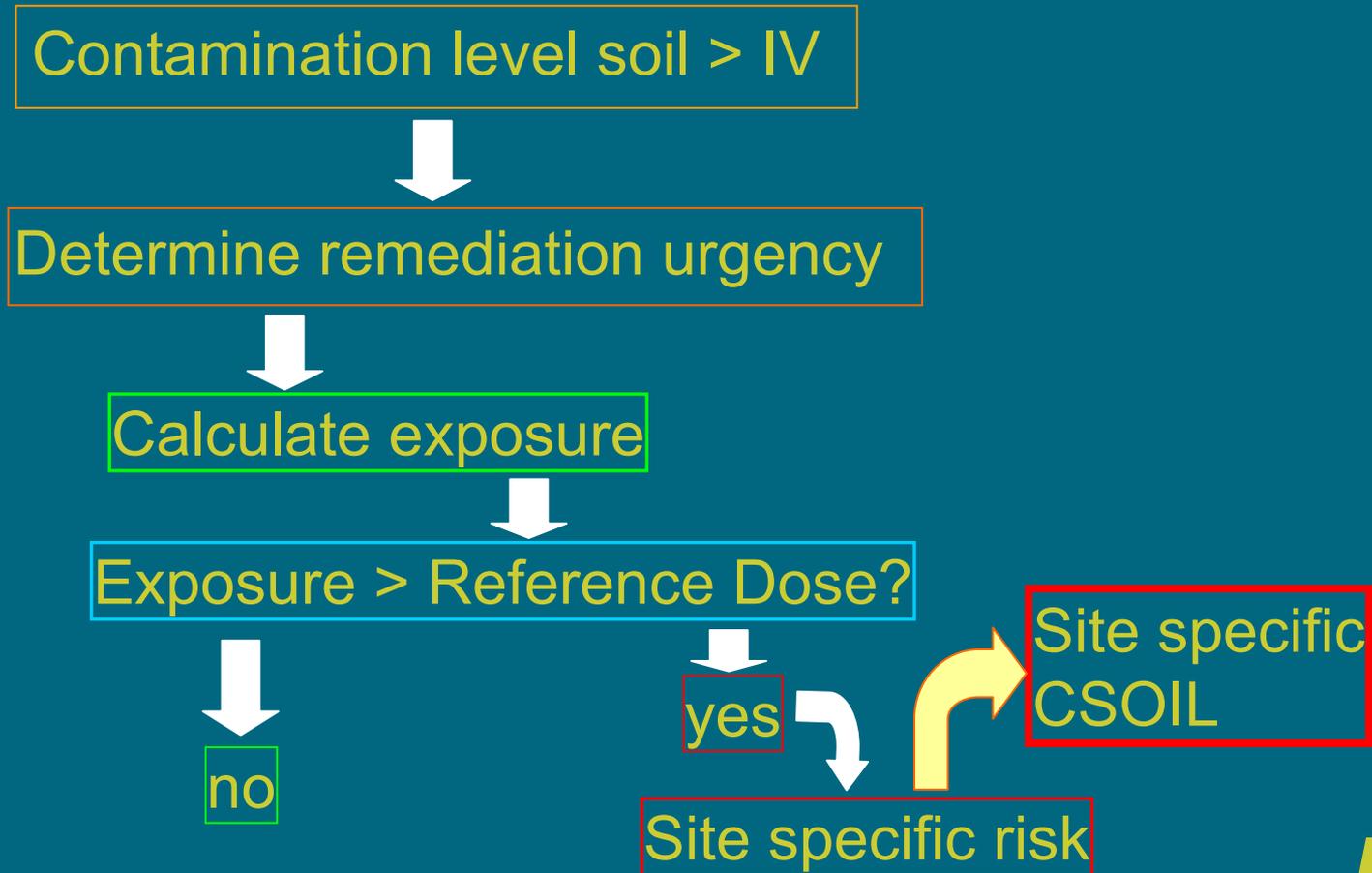
Otte PF et al. (2001) RIVM-report 711701021



CSOIL



SUS



Present/future Dutch policy

In 2023 all remediation actions finished

Tempo is by a factor 4 too slow (risk assessment)

Policy makers try to overcome these hurdles by:

More regional responsibility

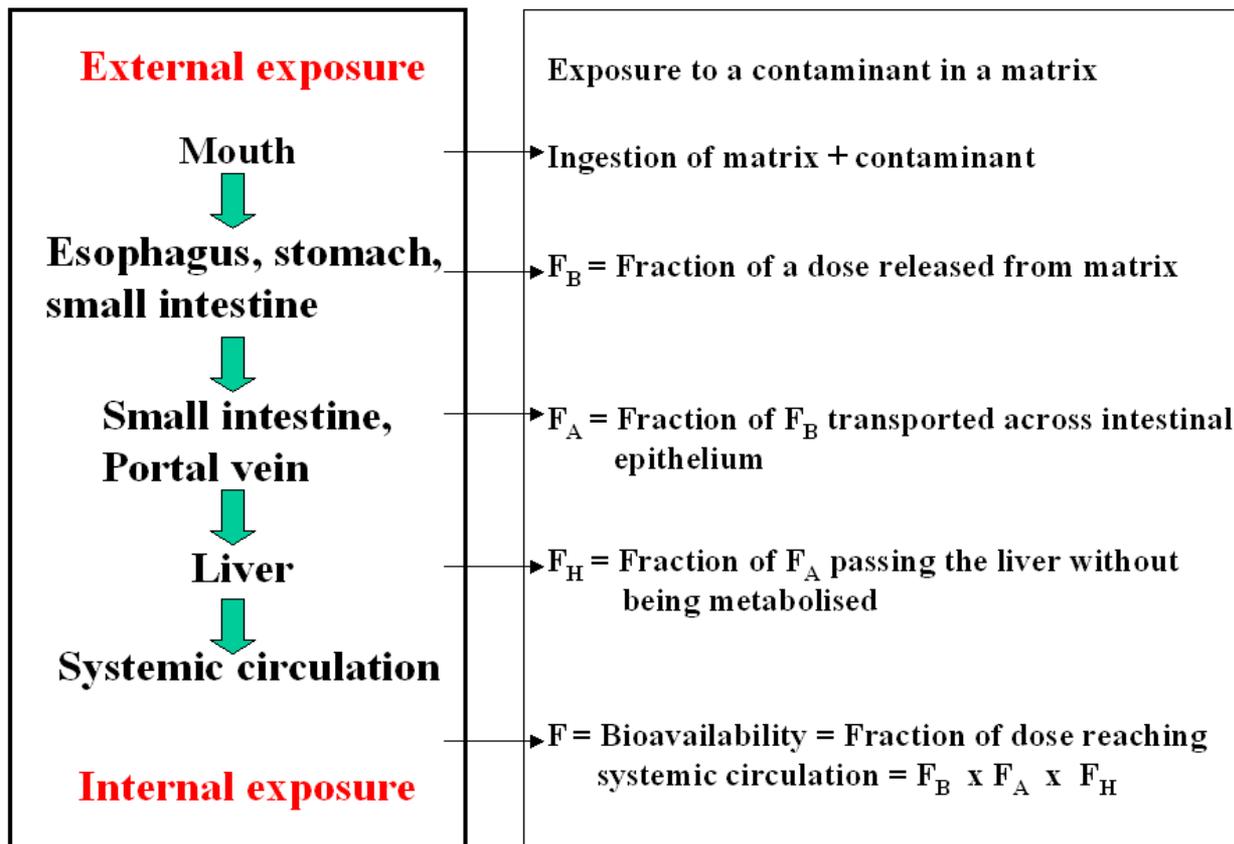
Cost efficient: Fitness for use, *in vitro* models

New tiered approach instead of SUS/CSOIL

Human risk assessment in CSOIL

- One of the routes of exposure is ingestion
- oral bioavailability (F_{soil})
- F_{soil} is assumed to equal F from matrices studied in toxicity studies underlying Reference Dose (RfD)
- CSOIL does not assume 100% F from soil
- *Relative* F is assumed to equal 100% in CSOIL

Bioavailability - our definition -

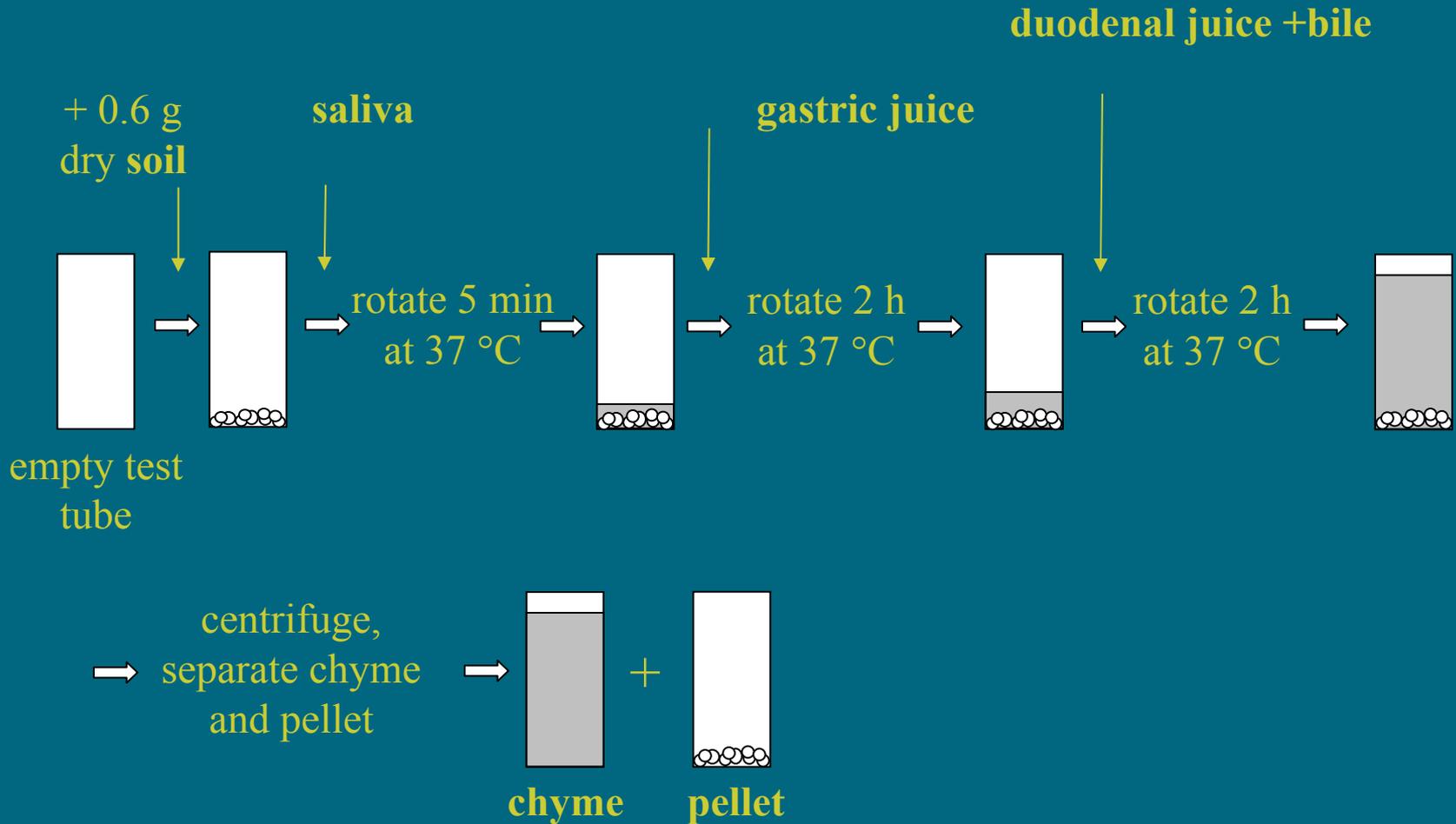


Relative F

$$F = F_b \times F_a \times F_h$$

- ◆ F_a and F_h are supposed to be compound specific and not depending on matrix of ingestions;
- ◆ information on $F_a \times F_h$ can be derived from studies using drinking water or olive oil as matrix
- ◆ *Relative F* is described by bioaccessibility from certain soil sample compared to bioaccessibility from matrix used in RfD-studies

In vitro digestionmodel



BARGE = Bioavailability Research Group Europe

Aim:

Comparison of *in vitro* digestion models (5) - round robin studies

Gaining insight in critical factors in those models - factorial designs

Comparison with *in vivo* data (from Maddeloni *et al.*) - one study in man available

Development:

more participants also outside of Europe

experiences from BARGE serve as input for ISO guideline

Oomen *et al.* 2002 *Environ. Sci. Technol.*, Maddeloni *et al.* 1998 *Environ. Health Perspect.*



BARGE

Bottlenecks BARGE

- financing
- only metals studied
- only one solid human *in vivo* study performed for validation

BARGE - wishes for the future

- New round robin studies, based on factorial design yield
 - insight in factors influencing results of bioaccessibility tests
 - better interpretation of existing data
- New round robin studies for organic compounds, based on factorial design yield
 - insight in factors influencing results of bioaccessibility tests concerning organic compounds
 - better interpretation of existing data

BARGE - wishes for the future

- New *in vivo* studies in man for various soil types and for organic as well as inorganic compounds yield
 - sound proof for vitro validation
 - better interpretation of existing data
- Better interaction between european and american/canadian groups specialized in bioaccessibility testing (e.g. annual workshop ?) yield
 - collaboration in research (shared research programme?)
 - bringing together various expertises involved

Description five digestion models

- (BGS, UK): static gastric model
- (Bochum, Germany): static gastrointestinal model
- In vitro digestion model (RIVM, NL): static gastrointestinal model
- (Ghent University, B): static gastrointestinal model
- (TNO, NL): dynamic gastrointestinal model

Table: Characteristics in vitro digestion models

	<i>SBET</i>	<i>DIN</i>	<i>RIVM</i>	<i>SHIME</i>	<i>TIM</i>
pH stomach	1.5	2.0	1.1	4.0	5.0 decreasing to 2.0 in 90 min
Incubation time stomach	1 h	2 h	2 h	3 h	Gradual secretion at 0.5 ml/min
Solid-to-fluid ratio stomach	1:100	1:50	1:38	1:2.5	1:30
pH intestine	-	7.5	5.5	6.5	6.5-7.2
Incubation time intestine	-	6 h	2 h	5 h	Gradual secretion at 1 ml/min
Conc bile	-	4.5 g/l	0.9 g/l	1.5 g/l	Variable
Solid-to-fluid ratio intestine	-	1:100	1:98	1:4	1:51
Separation chyme and pellet	0.45 μ m filter	Centrifugation 7000g	Centrifugation 3000g	Centrifugation 7000g	Hollow fiber membrane

Results

Bioaccessibility of As, Cd, and Pb after digestion of Montana 2711 (n=3)

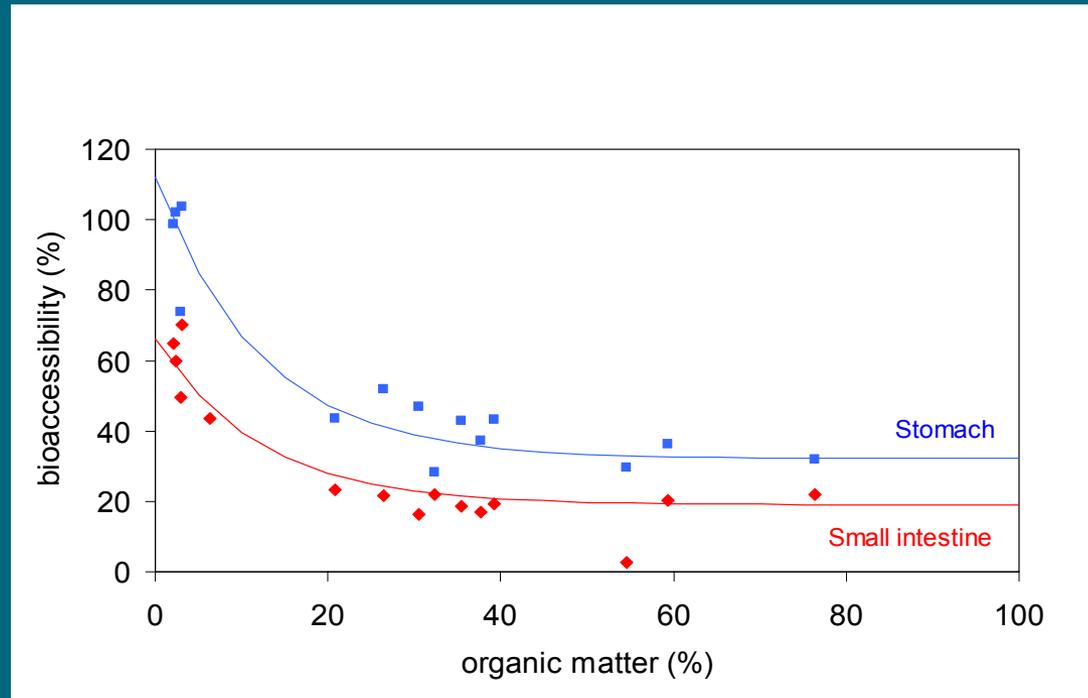
	<i>Bioacc As (%)</i>	<i>Bioacc Cd (%)</i>	<i>Bioacc Pb (%)</i>
SBET	59 ± 2	99 ± 4	90 ± 2
DIN*	50 ± 1	79 ± 8	68 ± 2
DIN-WM*	41 ± 2	45 ± 3	46 ± 2
RIVM	59 ± 1	40 ± 2	11 ± 2
SHIME	10 ± 0.4	6 ± 0.3	3 ± 0.3
TIM	50 ± 1 (n=2)	58 ± 1 (n=2)	17 ± 3 (n=2)

* DIN and DIN-WM represent a DIN digestion with and without milk powder, respectively.

Other soils: Flanders, Oker 11, Bunker Hill

Oomen et al. 2002, Environ. Sci. Technol. 36, 3326-3334.

Bioaccessibility and organic matter content



Future perspectives towards SUS

Is soil ingestion an important route ?

Yes

Estimation of relative F

In vitro digestion model

Site specific risk? = *Internal* exposure > *Internal* RfD?

no

yes

Result: reduction of contaminated sites with high remediation urgency

SUS new style offers

- Site specific risk assessment
- When soil ingestion is the most important route of external exposure, then determining *relative F* can be beneficial
 - e.g. not beneficial for pesticides, DDT, DDE, dioxines
 - e.g. beneficial for PAH's except naphthalene or di-benz(a,h)anthracene

Lijzen et al. RIVM report 711701 023 Technical evaluation of the Intervention Values for Soil/sediment and Groundwater. 2001

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